

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768173

FILED
Mar 06, 2010
Secretary of State

Entity Name: CRESTHAVEN APPLIANCE SERVICE, INC.

Current Principal Place of Business:

2650 BARKLEY DRIVE E., #B
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

2650 BARKLEY DRIVE E., #B
WEST PALM BEACH, FL 33415 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KRILL, AGNES
2650 BARKLEY DRIVE E., #B
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MARTIN, OLGA
Address: 2522-H EMORY DR. EAST
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VPD
Name: TIPPENS, LOUISE
Address: 2930 CROSLEY E. #L
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D
Name: GIGUERE, JOY
Address: 2769 ASHLEY W #4
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SD
Name: CHEESEMAN, JUDITH
Address: 2910-F AHSLEY DR. EAST
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TD
Name: LOTT, JEANNE
Address: 2681 BARKLEY W. #H
City-St-Zip: WEST PALM BEACH, FL 33415

Title: BOK
Name: KRILL, AGNES
Address: 2650 BARKLEY DRIVE E., #B
City-St-Zip: WEST PALM BEACH, FL 33415 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AGNES THERESA KRILL

BKPR

03/06/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date